



Robert E. Bush
Naval Hospital

Did you know?...

You have the right to express your concerns about patient safety and quality of care.

There are several avenues open to you:

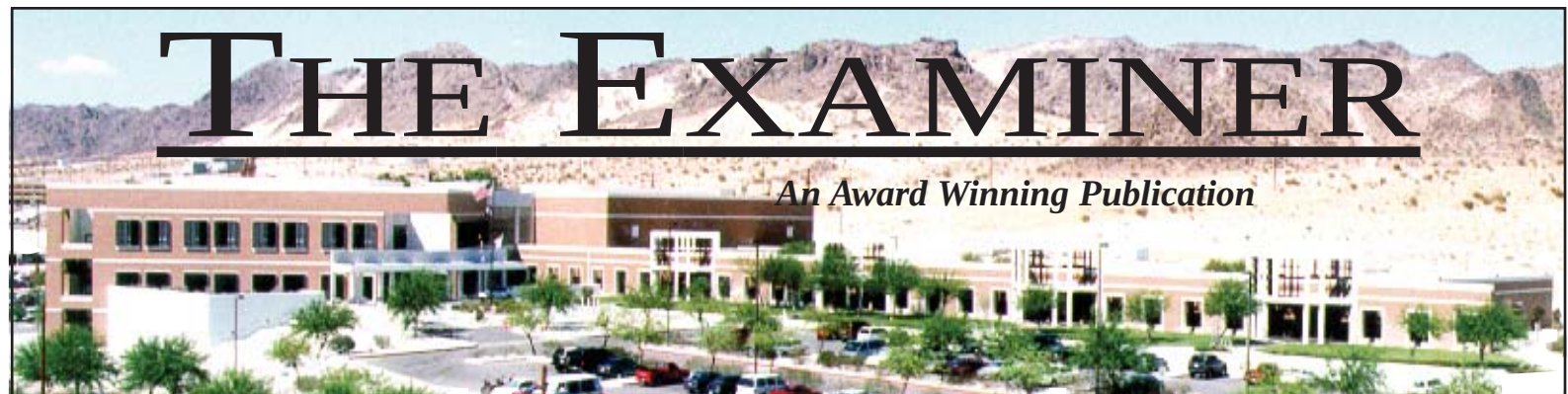
- * Through the ICE website.
- * The Hospital Customer Relations Officer at 760-830-2475, or any of the Customer Relations representatives in the Hospital clinics, or directly to the Joint Commission via: E-mail at complaint@jointcommission.org Fax: 630-792-5636

The Joint Commission
Oak Renaissance Boulevard
Oakbrook Terrace, IL 60181

To report Fraud, Waste and Abuse contact one of the below offices by calling:

Naval Hospital: 760-830-2344
Combat Center: 760-830-7749
NavMedWest: 1-877-479-3832
Medical IG: 1-800-637-6175
DoD IG: 1-800-424-9098

Commanding Officer
Naval Hospital Public Affairs Office
Box 788250 MAGTFC
Twentynine Palms, CA 92278-8250



<http://www.med.navy.mil/sites/nhttp/pages/default.aspx>

Got Mental Health?

By Capt. Anthony Arita, PhD,
Clinical Psychologist

Mental health is an essential factor in our quality of life, our sense of well-being, our relationships, our work, our mission readiness—it is essential to our life. Alterations in our normal thinking, mood, or behavior, coupled with distress and/or impairment in our ability to function, may manifest in mental health symptoms or a diagnosable condition. According to national surveillance studies, it is estimated that 25 percent of adults in the U.S. reported having a mental disorder in the past year and nearly half will develop a mental disorder during their lifetime.

In the Department of Defense's most recent health surveillance report, in 2016, mental health disorders accounted for the third highest total number of medical encounters and the largest total number of hospital bed days for active-duty military members. The highest incidence rates of mental health conditions were for adjustment disorders (28 percent), which generally reflect the psychological difficulties experienced around challenging life circumstance (e.g., loss of relationships, interpersonal conflict, financial hardship, problems in the workplace, family concerns, etc.). Over the past decade, there were more than 1.6 million incident diagnoses of mental health disorders among active-duty military members. These numbers should underscore the fact that mental health concerns are common.

To address mental health concerns, the Department of Defense (DoD) offers a wealth

of resources to help people remain psychologically healthy, or resilient, and also offers resources to assist when more assistance is needed. Two excellent, free, phone/live-chat resources, available 24/7, include the following:

- Psychological Health Resource Center ((866) 966-1020), www.realwarriors.net/livechat; provides information related to psychological health conditions, treatment, resilience, and resources.
- Military Onesource ((800) 342-9647), www.militaryonesource.mil; provides confidential, non-medical counseling and specialty consultations for DoD service members and immediate family members.

Some excellent DoD online resources, offering information, self-assessment, and educational tools, include:

- Afterdeployment, www.afterdeployment.dcoe.mil: Covers topics of depression, anxiety, anger, sleep, resiliences, families/kids, alcohol & drugs, post-traumatic stress, and more.
- Defense Health Agency (DHA) Connected Health (formerly, National Center for Telehealth & Technology) <http://t2health.dcoe.mil>: This site promotes psychological health by leveraging technology solutions (e.g., mobile health apps, websites, telehealth).

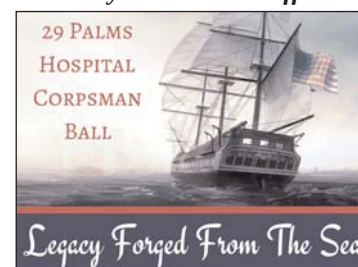
On the Marine Corps Air Ground Combat Center
Continued on Page 2; please see Mental Health Resources

WELCOME
2018 GRADUATES



Congratulations Lt. Brogdon!

Lt. Laurabeth Brogdon holds her Master of Science--Nursing degree. Lt. Brogdon earned the public-health centric degree, from Grand Canyon University, working from May 2016 to April 2018 in an online course of study. Brogdon said the degree "assists in her growth as a public-health nurse and strengthens her love for ambulatory care." Brogdon said she loved the course content. Lt. Brogdon was commissioned into the U.S. Navy in May, 2009. She currently works as a staff nurse in NHTP family medicine.



Mental Health Resources, continued from Page 1.

(MCAGCC), key resources for military members to address their psychological health needs include:

- Mental Health Clinic - Naval Hospital, Twentynine Palms (NHTP); ((760) 830-2724), located at the Adult Medical Care Clinic (AMCC), Bldg 1560, is open to active-duty members, Mon - Fri, 7:30 a.m. to 4 p.m., for walk-in, urgent, and routine evaluation/treatment of mental health symptoms/conditions (e.g., depression, anxiety, posttraumatic stress, suicidal thoughts, psychological trauma, insomnia). For service members in crisis after hours, emergent services are available at the NHTP Emergency Room.

- Marine Corps Community Counseling Center ((760) 830-7277), Bldg 1438, offers counseling support for short-term, non-medical, low severity concerns (e.g., stress, grief/loss, anger, relationship issues, life changes/adjustment, life balance), Mon - Fri, 7:30 a.m. to 4:30 p.m.

Despite the availability and ready access to mental health services, it is not uncommon for some to avoid these resources.

Concerns about stigma (i.e., feelings of fear, embarrassment, shame regarding mental health issues and treatment), privacy, and career concerns (i.e., concern that documented mental health conditions or treatment may hinder advancement, deployment, or ability to remain in the military) are all significant obstacles that may prevent military members from seeking the care they need. It is important to know that the vast majority of military members seeking care do not experience any unwanted impacts to their careers, but rather benefit from care and achieve a greater state of readiness. Further, it is important to know that the treatments and interventions for depression, posttraumatic stress disorder, suicidal crises are established and validated by scientific study (evidence-based) and articulated in clinical practice guidelines for DoD and VA.

Overall, this brief article serves to support the national health observance of Mental Health Awareness Month and highlights the following key points: 1) mental health is essential to health; 2) mental health concerns are common; 3) there are many psychological health services and resources available to address those concerns; 4) treatment is effective; and 5) people recover.



NHTP staff were the principal organizers for the Combat Center's 5-km "Shout Out Against Sexual Assault" race April 6. Top: HM3 Mariah Perez, HN Tomilola Odumuwa and HN Richard Postlethwaite pose with NHTP Commanding Officer, Capt. Nadji Hariri. Right: Capt. Hariri made opening remarks prior to start time, recounting her own experiences at the University of Oklahoma.



NHTP celebrated the Navy Chiefs' birthday April 3. The actual Chief Petty Officer birthday is April 1. The earliest use of the term Chief Petty Officer dates back to 1776 on board Continental Navy Ship Alfred, when the title, Chief Cook, was conferred upon cook's mate Joseph Wasabe.



Left: Hospital Corpsman First Class Michele Richardson retired April 20, after 20 years of faithful service. Richardson, originally from Palmdale, California, worked in the NHTP Operations Management Department. Fair Winds and Following Seas, HM1 Richardson!

Published by Hi-Desert Publishing, a private firm in no way connected with the Department of Defense, the United States Marine Corps, United States Navy or Naval Hospital, Twentynine Palms, under exclusive written contract with the Marine Air Ground Task Force Training Command. The appearance of advertising in this publication, including inserts or supplements, does not constitute endorsement by the Department of Defense, the United States Marine Corps, the United States Navy or Hi-Desert Publishing of the products or services advertised. Everything advertised in this publication shall be made available for purchase, use, or patronage without regard to race, color, religion, sex, national origin, age, marital status, physical handicap, political affiliation, or any other non-merit factor of the purchaser, user or patron. If a violation or rejection of this equal opportunity policy by an advertiser is confirmed, the publisher shall refuse to print advertising from that source until the violation is corrected. Editorial content is prepared by the Public Affairs Office, Naval Hospital, Twentynine Palms, Calif.

Commanding Officer

Capt. Nadjmeh M. Hariri, DC, USN

Executive Officer

Capt. Patrick K. Amersbach, NC, USN

Command Master Chief

HCMC (SW/AW/FMF) Jerry Ramey, USN

Public Affairs Officer/Editor

Mr. Dave Marks

Command Ombudsman

Mr. Brent Harris (760) 668-1178 email: nh29ombudsman@gmail.com

The Examiner welcomes your comments and suggestions concerning the publication. Deadline for submission of articles is the 15th of each month for the following month's edition. Any format is welcome, however, the preferred method of submission is by e-mail or by computer disk.

How to reach us...

Commanding Officer Naval Hospital
Public Affairs Office
Box 788250 MAGTFTC
Twentynine Palms, CA 92278-8250
Com: (760) 830-2362
DSN: 230-2362
E-mail: david.m.marks.civ@mail.mil
Hi-Desert Publishing Company
56445 Twentynine Palms Highway
Yucca Valley, CA 92284
Com: (760) 365-3315
FAX: (760) 365-8686



Conversations with Chaplains are Strictly Confidential

By Christianne M. Witten, Chief of Chaplains Public Affairs

WASHINGTON (NNS) -- In a recent poll on Navy Personnel Command's website, 63 percent of 5,049 respondents did not believe that what they say to a chaplain is confidential, and 65 percent of 2,895 respondents believe that Navy chaplains are required to report certain matters to the command.

In light of these results and other anecdotal evidence, Chief of Chaplains Rear Adm. Mark L. Tidd, saw an opportunity to roll out an official campaign to help educate service members, leadership and families across the Navy and Marine Corps on SECNAV Instruction 1730.9: Confidential Communications to Chaplains.

This policy was established on Feb. 7, 2008 to protect the sacred trust between an individual and a chaplain.

Per Navy policy, service members and families have the right and privilege to confidential communication with a Navy chaplain; Chaplains have the obligation and responsibility to protect and guard the confidential communications disclosed to them; and commanders honor and support the unique, confidential relationship between an individual and a chaplain.

Chaplains cannot be compelled by the command, medical professionals or others to disclose what a service member or family member shares in confidence.

"What you say to us stays

between us, unless you decide differently- You hold the key," said Tidd. "That being said, chaplains will always assist in guiding an individual to the appropriate resources and will not leave an individual alone when the individual or others are at risk," Tidd added.

Chaplains serve as advocates to help individuals get the support needed to overcome the challenges they face before matters escalate. "This unique relationship between an individual and a chaplain can serve as a valuable safety valve to the commander to facilitate increased morale and mission readiness," said Tidd.

Given the continuing stigma service members associate with seeking help, chaplains offer Sailors, Marines and their families a safe place to talk, without fear or judgment.

"Confidentiality can be particularly important when a Sailor or Marine may feel they have nowhere to turn during a personal crisis; or if they're concerned about command involvement or an impact on their career," Tidd said.

In addition to a Message to the Fleet on confidentiality, the Chaplain Corps has established a resource page devoted to confidentiality on its website: www.chaplain.navy.mil. This page includes frequently asked questions, a fact sheet, a flyer, as well as a link to the policy.

"The Chaplain Corps is committed to caring for all with dignity, respect and compassion,

regardless of an individual's beliefs, if any. One of the ways we do this is through confidentiality," Tidd said.

Contact your command chaplain today! Don't know who your chaplain is? Contact Navy 311 for support in your area: 1-855-NAVY-311 or text to: Navy311@navy.mil.

Visit www.chaplain.navy.mil to learn more about Navy chaplains and confidentiality and to review the complete SECNAV Instruction 1730.9 on confidential communications to chaplains.

For more news from Chaplain Corps, visit www.navy.mil/local/crb/.

Your Attitude Makes All the Difference

By Rev. Ron Cooley

Get the right perspective. When Goliath came against the Israelites, the soldiers all thought, "He's so big we can never kill him." David looked at the same giant and thought, "He's so big, how can I miss?"

--Russ Johnson

"He's so big we can never kill him." Goliath was a giant problem for the people of Israel. As part of an army threatening to invade and enslave the Hebrew people, Goliath epitomized an insurmountable problem. Today there are so many lives being bombarded with giant-like worries, problems and concerns, it is easy to become overwhelmed with feelings of hopelessness. Sadly, much of our sense of identity and self esteem can be

lost when we lose perspective. When our circumstances control us and it's not we who control our circumstances, the hopelessness can even lead to people wanting to quit.

Goals, relationships, employment, education, can all become adversely affected leading to depression, and other spiritual and health-related problems. Goliath was a real person and represented a giant problem to the people of God. Our problems are also VERY real and can just as easily appear insurmountable.

David, on the other hand, had a different perspective regarding the giant Goliath and the invading Philistine army.

David understood that his God was greater than any circumstances, including Goliath and his army. David drew on his faith and experiences to size up the problem facing him and determined that the giant made for a great target, not an insurmountable threat. "He's so big, how can I miss?"

What problem are you facing today that you and God can't handle?

Rev. Cooley Retires

Rev. Ron Cooley has been ministering to the NHTP family for seven and a half years. His last day was April 27, 2018. Rev. Cooley started his military career in 1974 when he enlisted into the U.S. Marine Corps as a private first class. After four years and achieving sergeant rank, Rev. Cooley pursued college and seminary school. He joined the Navy Reserves and was recalled to active duty in 1994. Many in our small Navy

The Examiner- May 2018 -- 3

family have fond memories of serving with Rev. Cooley. Cmdr. Wendy Stone, NHTP Director for Public Health recalls serving with Rev. Cooley on the USS Enterprise (CVN-65) from 2002 to 2004. "I was a lieutenant and he was a lieutenant commander and we were in the millionaire's club together. We had to accrue a million physical exercise points to rate a millionaire's club flight jacket. We worked out together and both earned it. He was awesome," Stone said.



Reverend Ron Cooley, his wife Beth, and NHTP Commanding Officer, Capt. Nadji Hariri, at the Combat Center's Frontline restaurant in January 2018.

Rev. Cooley characterizes his time at NHTP as a mentoring ministry. "I hold those at NHTP in the highest regard and have nothing but fondness and affection for my friends and colleagues at the Robert E. Bush Naval Hospital," Rev. Cooley said.



Awardees...

The following awards were presented during the First Friday Award Ceremony, April 6, 2018, in NHTP Classrooms 4 & 5. Hospital Commanding Officer, Capt. Nadji Hariri was the presenting officer with Executive Officer, Capt. Patrick Amersbach, and Command Master Chief Jerry Ramey.



Hospital Corpsman Third Class Richard Postlethwaite is awarded the Navy and Marine Corps Achievement Medal.



Hospital Corpsman Third Class Dylan Beck is awarded the Navy and Marine Corps Achievement Medal.



Ms. Tomesha Morrow is presented with a Federal Length of Service Award in grateful recognition and appreciation for her 10 years of faithful service to the federal government.



Hospital Corpsman First Class Gregory Kite is awarded two Navy and Marine Corps Achievement Medals for his superior performance aboard the USS Curtis Wilbur (DDG 54): 1. Selection as Senior Sailor of the Year (FY17); 2. While forward deployed, "Made life and limb saving diagnoses of numerous critically ill Sailors."



HMC Daniel Gonzalez is awarded the Navy and Marine Corps Commendation Medal.



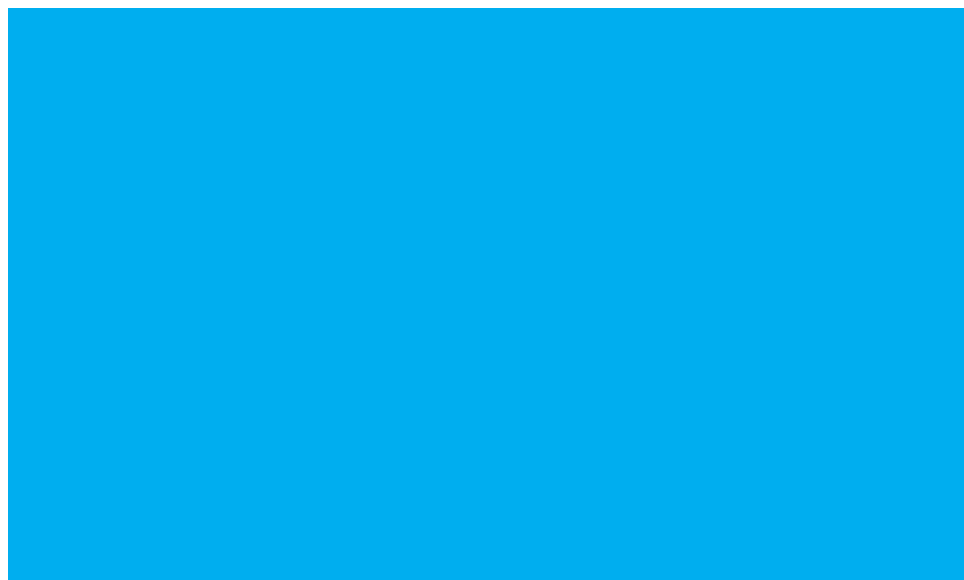
Hospital Corpsman Second Class Richard Montez is awarded the Navy and Marine Corps Achievement Medal.



Logistics Specialist Second Class Jarett Airey is awarded the Navy and Marine Corps Achievement Medal.



Ms. Leilani Clancy is presented with a Letter of Appreciation for her outstanding performance as the 2018 Navy Medicine West CPI Project competition runner up.



The following personnel received a Letter of Appreciation from Commanding Officer, Capt. Nadjmeh Hariri, for their outstanding performance in the Save the Children volunteer event. "I extend to you my sincere appreciation for your outstanding performance on February 8, 2018. Your willingness to contribute time to inventory 40,000 books was deeply appreciated by the Morongo and Barstow Unified School Districts. Your 'can do' attitude and determination to give back to your community resulted in a very prompt and successful delivery of critical items to the children, and directly contributed to a positive image for Naval Hospital Twentynine Palms and the Save the Children Program. Your exemplary professionalism and outstanding performance of duty reflected great credit upon yourself and were in keeping with the highest traditions of the United States Naval Service. I commend you for a job 'well done' and wish you continued success in your future endeavors."

--Signed, N. M. Hariri, Captain, Dental Corps, Commanding Officer, United States Navy



Hospital Corpsman First Class Serrita Coleman



Hospital Corpsman Third Class Scott Manamon



Hospitalman Apprentice Magon Wildroutd



Hospital Corpsman Third Class John Kellems



Hospital Corpsman Third Class Trevor Williams



Hospitalman Jacob Alvarez



Introducing New Staff -- Welcome Aboard!



LS1 Jacob Anair

Logistics Specialist First Class Jacob Anair arrived from a four-year assignment on the cruiser, USS Mobile Bay (CG 53), out of San Diego, where he was Departmental Lead Petty Officer for S1, S2 and S3. Anair was in charge of the logistic specialists, the culinary specialists and the ship's servicemen. Hometown is York Beach, Maine. Anair joined up out of a sense of family history. Both his father and grandfather were Navy Chiefs. "Everyone in my family has either been U.S. Marines, Army or Navy, he said. Anair has been based out San Diego since receiving his first assignment 11 years ago. He wanted to see the world, and being assigned to a Navy cruiser accomplished that goal. "We were stationed in Singapore for three months, which I really enjoyed," Anair said. Anair has his Associate's degree and plans on completing his four-year degree in business and finance while assigned here. Anair is accompanied by his wife and their one-year-old husky named, Blue.



Lt. Manuel Monge

Lt. Manuel Monge arrived from the Navy Recruiting Command, Brooklyn, New York, which he says was a challenging assignment trying to sign up licensed and unlicensed medical personnel for a career in the Navy. Monge was a recruiter for the past three and a half years. He's been in the Navy 19 years. He started out as a deck seaman/boat-swain's mate. Beginning his Naval career as a seaman recruit, and after attaining the rank of HM2 after eight years, Monge applied for and was accepted into the Medical Enlisted Commissioning Program. Without a break in service, Monge earned his RN degree from San Diego State University between 2006-2008. A clinical nurse specialist, Monge focused on acute trauma care but is now working on his post Master's degree which will qualify him as a mental-health Nurse Practitioner. Monge plans to eventually pursue a PhD. in nursing. Hobbies include baseball, soccer, hiking and watching sports on TV.



CS2 Zakkry Walls

Culinary Specialist Second Class Zakkry Walls arrived from the Norfolk, Virginia-based, USS Gonzalez (DDG 66), where he worked his way up from cook on the watch, to assistant LPO. "I like leading, so it was a great experience," he said. Walls has been in the Navy for six years. Apart from Corps School, he's been on the USS Gonzalez all of that time. Hometown is Bedford, Indiana. Walls said he signed up for the usual reasons, seeing the world, "But really, I was looking for a better experience than being in the Midwest," he said. "I wanted to better myself and mature." Walls said he was interested in photography and nursing prior to enlisting and still plans to pursue those goals. On the USS Gonzalez, he received public affairs training and assisted the mass communications specialists, working on the crewsbook committee. Walls enjoys photography as well as baking. He has an on-line business for custom-order baking. Walls also enjoys hiking and reading.



HN Destin Alvarez

Hospitalman Destin Alvarez arrived from Okinawa where he was assigned to the Combat Assault Battalion (Combat Engineers); and was then assigned to the 12th Marine Regiment (artillery). He mostly dealt with musculoskeletal issues, sprains, bumps, bruises and colds, but had the occasional "nasty laceration or TBI." He's been in the Navy for four years. Hometown is Colorado Springs, Colorado. He initially joined up "To serve my country and make a change," he said. Alvarez has completed most of an Associate's degree and intends to attain his Bachelor's degree; although he hasn't settled yet on a major, but is leaning towards the health sciences. Alvarez said the leadership qualities he most admires include "not overly micro managing, being down to earth, and having their Sailors' back." Alvarez noted that the NHTP enlisted barracks "are the nicest barracks I've been in so far." Hobbies include off-road riding, pool, "and out doorsy stuff."



Lt. Cmdr. Nicky Tomblin

Lt. Cmdr. Nicky Tomblin, a certified nurse midwife, arrived from Naval Medical Center Camp Lejeune, where she said they deliver approximately 200 babies per month. Tomblin was a Navy Corpsman for about 11 years before applying for the Medical Enlisted Commissioning Program (MECP). As a Corpsman, Tomblin served on the USS Shiloh (CG-67). She earned her RN degree from Point Loma Nazarene University in San Diego. Tomblin was assigned to the labor and delivery ward at Naval Hospital Okinawa where she met her first nurse midwife. She was excited by the prospect of delivering babies for a living and applied for a graduate program that allowed her to earn a nurse midwife Master's degree at Cal State Fullerton. Hometown is Gainesville, Georgia. Tomblin is here with her husband, a former Corpsman and currently an insurance adjuster, and their daughter. Hobbies include reading (mostly self-help books), basketball, and exercise.

NTHP Sexual Assault Forensics Program

**By Lt. Cmdr. Esther Colbert,
NHTP SAFE Program
Manager**

While sexual assault is a personal and destructive crime, it has a negative impact on our entire community. Unfortunately, sexual assault is still a prevalent offense. The 2017 Annual Report on Sexual Assault in the U.S. military shows that 14,900 service members were sexually assaulted in 2016. In 2016, only 6,172 beneficiaries (military and dependents) chose to file a sexual assault report. Rear Adm. Ann Burkhardt, Director of DoD’s Sexual Assault Prevention and Response Office, stated: “Far too many of our people find their lives changed by this crime and there are far too many who continue to suffer in silence.” Rear Adm. Burkhardt said: “Protecting service members and their families from sexual assault protects our mission. We will not cease our efforts until we get this right.”

At Naval Hospital Twentynine Palms, our staff is dedicated to providing victims of sexual assault compassionate victim support, exceptional medical care, and thorough forensic evi-

dence collection.

What is sexual assault?

The DoD SAFE Helpline (<https://safehelpline.org>) defines sexual assault as sexual contact that occurs without your consent. It is a crime. Sexual assault is intentional sexual contact, characterized by use of force, physical threats, or abuse of authority, or when the victim does not or cannot consent. In these cases, it may be a sexual assault even if you did not physically resist the assailant. Sexual assault can occur without regard to gender or spousal relationship or age of victim.

What is the SAFE Program and what is the role of the SAMFE?

A SAMFE is a Sexual Assault Medical Forensic Examiner who provides victims of sexual assault with a head-to-toe medical forensic exam, known as a SAFE (Sexual Assault Forensic Exam).

What sexual assault services are available at NHTP?

NHTP offers a SAFE to adult

beneficiaries eligible for care in the military health-care system. These exams are available up to seven days (or 120 hours) following a sexual assault. Exam services are accessible 24 hours a day, 7 days a week. Restricted and Unrestricted reporting options are available.

What do you do if you or someone you know is a victim of sexual assault?

The most important step is for you to immediately get to a safe location away from the perpetrator. At your earliest opportunity, either contact the Base Sexual Assault Response Coordinator’s 24/7 Sexual Assault Support Line ((760)799-0273), or report directly to the NHTP Emergency Room. If you choose to change personal hygiene items or your clothes from the assault, please bring all items in a paper bag with you to the ER. Try to minimize performing any activity that may remove evidence from your body such as bathing, washing hands, brushing your teeth, smoking, eating or drinking, etc.

In the field of Medical Forensics, time is evidence.

The longer it takes to report, the less likely forensic evidence will be obtainable.

What should you expect when you report?

Patients who report a Sexual Assault will be escorted to the NHTP Emergency Room and immediately placed in a private room. The ER provider will evaluate the patient and treat any immediate medical concerns. During the ER visit, the provider will screen for exposure to sexually transmitted infections, and discuss prophylactic medication treatments. At this time, the patient may also request to speak with a Victim’s Legal Counsel for additional legal guidance.

After ensuring that the patient has been medically treated, the SAMFE team will explain the SAFE process, and obtain consent from the patient to perform the exam. The patient may decline or change his/her mind at any time throughout the exam, without affecting the medical care he/she receives. Accompanied by the victim advocate, the SAMFE will escort the patient to a private

clinical exam room for the completion of the exam. Depending on the patient’s needs, a SAFE may take several hours to complete thoroughly. Food, drinks, and the option to change your clothes and shower will be provided throughout the exam. The patient decides if the evidence will be turned over to law enforcement, or if it will be stored in a secure evidence storage facility for up to five years from the date the SAFE was collected.

The NHTP SAMFE Team’s Commitment:

Throughout the exam, the NHTP SAMFE Team is dedicated to ensuring that each patient’s privacy, dignity, and confidentiality are respected. Our goal is to avoid re-victimization, and to support efforts to restore the patient’s well-being through the provision of comprehensive and compassionate care to adult victims of sexual assault.

Understanding Sexual Assault Reporting Options

RESTRICTED REPORT

This reporting option allows you to confidentially disclose the crime to a Sexual Assault Response Coordinator (SARC), SAPR Victim Advocate (VA), or health care personnel so that you can receive medical treatment and SAPR services.

When filing a Restricted report, the base Sexual Assault Response Coordinator (SARC) will be notified and will immediately assign a SAPR Victim’s Advocate. The victim advocate will fully explain your options, including the benefits, and limitations associated with Restricted Reporting.

If you file a Restricted Report, your chain of command will not be notified, and there will not be an official investigation of the crime (so the person who attacked you will not be ques-

tioned or disciplined). If you want to pursue criminal charges, you must file an Unrestricted Report.

You may also speak confidentially with a Special Victim’s Counsel/Victim’s Legal Counsel, legal assistance attorney and/or chaplain about the sexual assault without triggering a report, command notification or an investigation.

Your medical care is not impacted by your reporting choice. No one can order you to have a SAFE conducted. The decision to have a SAFE is completely up to you. At your request, the healthcare provider will arrange for a SAFE to be conducted.

While you are not required to have a SAFE, such an exam may result in the collection of valuable evidence that will aid investigators.

The evidence collected during a Restricted Report will be stored up to five years from the date of the assault. At any time during those 5 years, you can chose to change the case to Unrestricted for an official investigation.

UNRESTRICTED REPORT

This reporting option is for victims of sexual assault who desire an official investigation of the crime.

Service members who are sexually assaulted and want to make an Unrestricted Report may report the assault to a SARC, SAPR victim’s advocate, healthcare personnel, a member of your chain of command, law enforcement, legal personnel, or a chaplain.

When filing an Unrestricted report, the base Sexual Assault

Response Coordinator (SARC) will be notified and will immediately assign a SAPR Victim’s Advocate. The victim’s advocate will fully explain your options, including the benefits, and limitations associated with Unrestricted Reporting.

Your commander will be informed and the military criminal investigative agency (NCIS) will be informed, as well as legal personnel.

As a victim of crime, you are entitled to certain rights; and you have the option to speak with a Special Victims’ Counsel / Victims’ Legal Counsel or Victim Witness Assistance Personnel to assist you with navigating the military justice process and enforcing your rights.

Also, any healthcare personnel you choose to receive services

from (e.g., counselor or nurse) will know. Details about the incident will be limited to only those personnel who have a legitimate need to know.

No one can order you to have a SAFE conducted. The decision to have a SAFE is completely up to you. At your request, the healthcare provider will arrange for a SAFE to be conducted.

While you are not required to have a SAFE, such an exam may result in the collection of valuable evidence that will aid investigators.



Call 1-800-TRICARE (874-2273); Option 1
24 hours a day, 7 days a week

